

110503 110503 110503 U.S. PTO  
COMMISSIONER FOR PATENTS  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria, VA 22313-1450

PATENT APPLICATION  
Date: November 5, 2003  
File No. 0941.68673

22278 U.S. PTO  
10/702134

Sir:

Transmitted herewith for filing pursuant to  
35 U.S.C. 111(a), is the patent application of

Inventor(s): Odajima et al.

*I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.*

Nov. 5, 2003  
Date

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For: AN OPTICAL DEVICE, INFORMATION  
RECORDING/REPRODUCING APPARATUS  
USING THE OPTICAL DEVICE

Enclosed are:

- (X) 27 pages of specification, including 14 claims and an abstract.
- ( ) an executed oath or declaration, with power of attorney.
- (X) an unexecuted oath or declaration, with power of attorney.
- ( )     sheet(s) of informal drawing(s).
- (X) 12 sheet(s) of formal drawings(s).
- ( ) Assignment(s) of the invention to                      and Assignment Cover Sheet.
- ( ) A check in the amount of \$            to cover the fee for recording the assignment(s).
- (X) Information Disclosure Statement, Form PTO-1449 and cited references.
- ( ) Claim for Priority and Priority Document.
- (X) Preliminary Amendment.

Fee Calculation For Claims As Filed

a) Basic Fee						\$ 770.00
b) Independent Claims	<u>2</u>	-	<u>3</u>	=	<u>0</u>	x \$ 86.00 = \$ <u>          </u>
c) Total Claims	<u>30</u>	-	<u>20</u>	=	<u>10</u>	x \$ 18.00 = \$ <u>180.00</u>
d) Fee for Multiple Dependent Claims						\$ 290.00 = \$ <u>290.00</u>
Total Filing Fee						\$ <u>1,240.00</u>

( ) Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$           

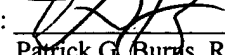
( ) A check in the amount of \$            to cover the filing fee is enclosed.

( ) Charge \$            to Deposit Account No. 07-2069.

() ~~The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. 1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.~~

Respectfully submitted,

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